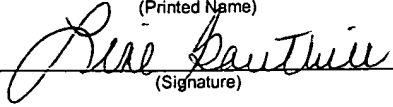


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Roger A. Sabbadini
Title: COMPOSITIONS AND METHODS FOR
THE TREATMENT AND PREVENTION
OF CANCER, ANGIOGENESIS, AND
INFLAMMATION
Appl. No.: Unknown
Filing Date: Herewith
Examiner: Unknown
Art Unit: Unknown

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EL 990320155 US	April 7, 2004
(Express Mail Label Number)	(Date of Deposit)
Line Gauthier	
(Printed Name)	
	
(Signature)	

UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

ROGER A. SABBADINI
12509 Del Sol Road
Lakeside, CA 92040

☒ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

☒ Specification, Claim(s), and Abstract (147 pages).

☒ Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00	=	\$770.00
Total	25	-	20	=	5	x	\$18.00	=	\$90.00
Claims:									
Independents	2	-	3	=	0	x	\$86.00	=	\$0.00
If any Multiple Dependent Claim(s) present:					+		\$290.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration					+		\$130.00	=	\$130.00
							SUBTOTAL:	=	\$990.00
[X]							Small Entity Fees Apply (subtract ½ of above):	=	\$495.00
							TOTAL FILING FEE:	=	\$495.00

[X] A check in the amount of \$495.00 to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date April 7, 2004

Respectfully submitted,

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By Richard San Pietro
Richard San Pietro
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